FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)														
	·						Office use only							_
NAME OF COMMITTEE (in		eck if name nanged)		iple: If typyii he lines	ng, type	1	2FE	4M5	-	1				
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COMMITTEE'S E-MA	AIL ADDRESS		CITY			ST	ATE.	•		ZI	P COD	E 📥		
williamg@ali	pac.us								1 1		1 1			ı
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COMMITTEE'S WE	PACE ADDRESS (URL)													-
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COMMITTEE'S FAX	NUMBER													
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2. DATE 0	M / D D / Y Y 2	0 0 8 °												
3. FEC IDENTIFIC	ATION NUMBER	C	C00	105878										
4. IS THIS STATE	MENT X NEW (N)	OR		AMEN	DED (A)									
I certify that I have exar	nined this Statement and to th	e best of my know	ledge and	I belief it is tr	ue, correct	and co	mplet	е						_
Type or Print Name o	f Treasurer Ms.	lane Patterso	n											_
Signature of Treasure	er Electronically Filed by	Ms Jane Pa	atterso	1		Da	te	M 8	M /	D D D	2 /	Ý Ž	ο ο ο	
NOTE: Submission of f	alse, erroneous, or incomplete	information may	•		Ü			•		of 2 U.S	.C. S43	7g.		_
Office Use Only				For further Federal Electroll Free 800 Local 202-69	tion Comm 0-424-9530	nission	act:			FEC (Revis	FOF sed 12/2		1	_

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